

General

Title

General orthopedic impairment functional health status: mean change score in physical functional health status of patients receiving physical rehabilitation.

Source(s)

Focus On Therapeutic Outcomes, Inc. (FOTO). Patient inquiry®: interactive health analysis® [CD-ROM]. Knoxville (TN): Focus On Therapeutic Outcomes, Inc. (FOTO®); 2006. 1 disc.

Measure Domain

Primary Measure Domain

Clinical Quality Measures: Outcome

Secondary Measure Domain

Clinical Quality Measure: Patient Experience

Brief Abstract

Description

This measure assesses physical functional health status of patients who received outpatient rehabilitation through the use of self-report health status questionnaires. Because the measures are taken at intake, during, and at discharge from rehabilitation, change in physical functional health status can be assessed. Measure results are available in Outcomes Profile Reports, which provide 1) information for clinicians to help direct and improve the care of their patients in real time during treatment, and 2) once treatments are complete a comparison of the clinician's or facility's outcomes and the National Aggregate in the FOTO® Database.

Rationale

Collection of outcomes following clinical treatment is now commonplace in rehabilitation. (Hart 2002) Clinicians use outcomes to track changes in their patients to assess if the patient is improving with a specific treatment, (Jette & Delitto 1997) if treatment needs to be changed or terminated, (Jette & Jette

1997) and if the patient needs to be referred to another clinician or service. (Jette & Jette 1997) Administrators use outcomes to compare their department's success with other similar departments, to market the department's services, to manage resources required to deliver their clinical services, and to manage their clinicians. (Marino 1997) Researchers analyze outcomes data for a variety of reasons including directing clinical education needs of providers, identifying clinical experts, etc. (Resnik & Hart 2003) The federal government has mandated the collection of outcomes for post-acute rehabilitation in skilled nursing facilities, nursing homes and in patient rehabilitation hospitals, and the government has directed the development of patient assessment instruments designed to collect outcomes. (Johnson 2001)

The process of outcomes management is evolving, and now many consider collection of functional status and health and well being the gold standard of outcomes measurement. Patient self-report of health status instruments, which quantify the client's perception of their functional abilities and health and well-being in standardized terms, have been recommended as outcomes tools for effectiveness research studies in rehabilitation. Standardized functional health status measures facilitate assessment of quality and value of clinical care. (Hart 2001)

Evidence for Rationale

Hart DL, Wright BD. Development of an index of physical functional health status in rehabilitation. Arch Phys Med Rehabil. 2002 May;83(5):655-65. [PubMed](#)

Hart DL. The power of outcomes: FOTO Industrial Outcomes Tool -- Initial assessment. Work. 2001;16(1):39-51. [PubMed](#)

Jette AM, Delitto A. Physical therapy treatment choices for musculoskeletal impairments. Phys Ther. 1997 Feb;77(2):145-54. [PubMed](#)

Jette DU, Jette AM. Professional uncertainty and treatment choices by physical therapists. Arch Phys Med Rehabil. 1997 Dec;78(12):1346-51. [PubMed](#)

Marino MJ. Outcomes management: a new paradigm for leadership. J Rehabil Outcomes Measure. 1997;1(3):58-62.

Resnik L, Hart DL. Using clinical outcomes to identify expert physical therapists. Fort Lauderdale (FL): Institutional Review board for the Protection of Human Subjects, Nov Southeastern University; 2002. 31 p. [70 references]

Primary Health Components

Physical functional health status; physical rehabilitation

Denominator Description

All patients treated at a Focus On Therapeutic Outcomes (FOTO®) participating outpatient rehabilitation clinic for whom both admission and discharge self-report health status questionnaires were completed

Numerator Description

The mean of patients' change scores on the "Physical Functional Health Status Measure"

Evidence Supporting the Measure

Type of Evidence Supporting the Criterion of Quality for the Measure

One or more research studies published in a National Library of Medicine (NLM) indexed, peer-reviewed journal

Additional Information Supporting Need for the Measure

- Musculoskeletal impairments account for a larger percentage of conditions for which medical care is sought in the United States (U.S.), and a large proportion of the cost associated with this care is related to the disability caused by these impairments. In 1984, Cunningham and Kelsey reported the overall prevalence of musculoskeletal impairments using data from the National Health and Nutrition Examination Survey (NHANES) I. In the U.S., 32.6% of persons between the ages of 25 and 74 years were affected by some type of physician-observed musculoskeletal impairment, and 29.7% of the population had self-reported musculoskeletal impairments. Impairments related to the spine had the highest prevalence. In the National Medical Care Utilization and Expenditure Survey (NMCUES), about 20% of the 1980 noninstitutionalized population reported having a musculoskeletal problem involving the back or joints that resulted in some type of disability or use of the health care system.
- In the United States (U.S.), 10.9% of all medical office visits are primarily for musculoskeletal pathology or impairments, with 2% of all visits for back symptoms.
- The National Medical Care Utilization and Expenditure Survey (NMCUES) indicated that 13.3% of total charges for treatment of musculoskeletal conditions was attributed to care given by health care professionals other than physicians, including physical therapists. The cost of health care related to the treatment of musculoskeletal impairments accounted for 8% of total health care expenditures in 1980, ranking third among health problems in terms of costs for civilian noninstitutionalized individuals.

Evidence for Additional Information Supporting Need for the Measure

Jette AM, Delitto A. Physical therapy treatment choices for musculoskeletal impairments. *Phys Ther.* 1997 Feb;77(2):145-54. [PubMed](#)

Jette DU, Jette AM. Physical therapy and health outcomes in patients with spinal impairments. *Phys Ther.* 1996 Sep;76(9):930-41; discussion 942-5. [PubMed](#)

Extent of Measure Testing

The Physical Functional Health Status (FHS) measure uses an ever expanding item bank of physical functioning items developed by cocalibrating existing health status questionnaires and new items using Item Response Theory mathematics. Original work described a 36 item bank (FHS-36) of physical functioning that used a set of hierarchically structured items representing a broad underlying construct applicable to patients in outpatient centers and postacute rehabilitation facilities. The hierarchical structure of the physical FHS-36 was clinically logical and had construct validity. Items fit together to define a single variable of physical functioning, which supported the measure's content validity and unidimensionality. Studies are ongoing to expand the item bank by adding more condition-specific items designed to increase measure precision while reducing respondent burden.

Evidence for Extent of Measure Testing

State of Use of the Measure

State of Use

Current routine use

Current Use

not defined yet

Application of the Measure in its Current Use

Measurement Setting

Ambulatory/Office-based Care

Ambulatory Procedure/Imaging Center

Ancillary Services

Hospital Outpatient

Managed Care Plans

Rehabilitation Centers

Professionals Involved in Delivery of Health Services

not defined yet

Least Aggregated Level of Services Delivery Addressed

Individual Clinicians or Public Health Professionals

Statement of Acceptable Minimum Sample Size

Unspecified

Target Population Age

Age greater than or equal to 14 years

Target Population Gender

Either male or female

National Strategy for Quality Improvement in Health Care

National Quality Strategy Aim

Better Care

National Quality Strategy Priority

Health and Well-being of Communities

Person- and Family-centered Care

Prevention and Treatment of Leading Causes of Mortality

Institute of Medicine (IOM) National Health Care Quality Report Categories

IOM Care Need

Getting Better

Living with Illness

Staying Healthy

IOM Domain

Effectiveness

Patient-centeredness

Data Collection for the Measure

Case Finding Period

Unspecified

Denominator Sampling Frame

Patients associated with provider

Denominator (Index) Event or Characteristic

Clinical Condition

Patient/Individual (Consumer) Characteristic

Therapeutic Intervention

Denominator Time Window

not defined yet

Denominator Inclusions/Exclusions

Inclusions

All patients with neuromusculoskeletal impairments treated at a Focus On Therapeutic Outcomes (FOTO®) participating outpatient rehabilitation clinic for whom both admission and discharge self-report health status questionnaires were completed

Exclusions

Patient less than 14 years of age

Patients unable to communicate in English, Spanish, or French, or patient does not have a translator/proxy who can communicate in English or Spanish

Exclusions/Exceptions

not defined yet

Numerator Inclusions/Exclusions

Inclusions

The mean of patients' change scores on the "Physical Functional Health Status Measure"

Exclusions

Unspecified

Numerator Search Strategy

Fixed time period or point in time

Data Source

Patient/Individual survey

Type of Health State

Functional Status

Instruments Used and/or Associated with the Measure

Focus On Therapeutic Outcomes (FOTO) Physical Functional Health Status (FHS-50) Measure

Computation of the Measure

Measure Specifies Disaggregation

Does not apply to this measure

Scoring

Composite/Scale

Mean/Median

Weighted Score

Interpretation of Score

Desired value is a higher score

Allowance for Patient or Population Factors

not defined yet

Description of Allowance for Patient or Population Factors

Measure outcomes are risk-adjusted by care type, impairment type, severity, acuity, age, and surgical history.

Also, Focus On Therapeutic Outcomes (FOTO®) offers participants the option of adding custom reports to their standard outcomes profile. Some common sorts for these custom reports are by clinician, referral source, payment source, or International Classification of Diseases, Ninth Revision, Clinical Modification (ICD-9-CM) code.

Standard of Comparison

not defined yet

Identifying Information

Original Title

Physical functional health status (FHS-50) measure.

Measure Collection Name

Patient Inquiry® Software

Submitter

Focus On Therapeutic Outcomes, Inc. - For Profit Organization

Developer

Focus On Therapeutic Outcomes, Inc. - For Profit Organization

Funding Source(s)

Focus On Therapeutic Outcomes, Inc. (FOTO) was solely responsible for funding the research used to develop the Physical Functional Health Status measure.

Composition of the Group that Developed the Measure

The research team that developed and tested the Physical Functional Health Status measure was led by Dennis L. Hart, PT, PhD, Director of Consulting and Research, FOTO, Knoxville, TN. Other members of the research team included: Jerome E. Mioduski, MS, Programmer, FOTO, Knoxville, TN; Benjamin D. Wright, PhD, Professor, University of Chicago and MESA Press, Chicago, IL; and Michael Linacre, PhD, Professor, University of Chicago and MESA Press, Chicago, IL.

Financial Disclosures/Other Potential Conflicts of Interest

Dr. Hart is an investor in and an employee of Focus On Therapeutic Outcomes, Inc. (FOTO). Mr. Mioduski is an employee of FOTO. Dr. Wright and Dr. Linacre were paid consults to FOTO during the development of this measure. Therefore, Dr. Wright and Dr. Linacre received financial rewards for their time and expertise used during the development and testing of the measure. Dr. Wright and Dr. Linacre are no longer functioning as consultants to FOTO, so they will receive no future financial rewards related to the use of this measure.

Endorser

National Quality Forum - None

NQF Number

not defined yet

Date of Endorsement

2012 Oct 4

Measure Initiative(s)

Physician Quality Reporting System

Adaptation

This measure was not adapted from another source.

Date of Most Current Version in NQMC

2003 Sep

Measure Maintenance

Unspecified

Date of Next Anticipated Revision

Unspecified

Measure Status

This is the current release of the measure.

The measure developer reaffirmed the currency of this measure in April 2016.

Measure Availability

Source available for purchase from the [Focus On Therapeutic Outcomes, Inc. \(FOTO®\) Web site](#)

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For more information, contact FOTO® at Phone: 800-482-3686.

Companion Documents

Focus On Therapeutic Outcomes, Inc. (FOTO). Patient Inquiry™ demo tour [version 5.0]. Knoxville (TN): Focus On Therapeutic Outcomes, Inc. (FOTO®); 8 p.

NQMC Status

This NQMC summary was completed by ECRI on January 8, 2004. The information was verified by the measure developer on January 13, 2004.

This NQMC summary was retrofitted into the new template on May 10, 2011.

The information was reaffirmed by the measure developer on April 25, 2016.

Copyright Statement

This NQMC summary is based on the original measure, which is subject to the measure developer's copyright restrictions.

For more information, contact FOTO, Inc., phone: 800-482-3686; e-mail: judyholder@fotoinc.com; Web site: <http://www.fotoinc.com> .

Production

Source(s)

Focus On Therapeutic Outcomes, Inc. (FOTO). Patient inquiry®: interactive health analysis® [CD-ROM]. Knoxville (TN): Focus On Therapeutic Outcomes, Inc. (FOTO®); 2006. 1 disc.

Disclaimer

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